



IAP7 Rec'd PCT/PTO 06 FEB 2006

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|---|----------------------|------------------------|----------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application No. | 10/539,378 | |
| | Filing Date | June 15, 2005 | |
| | First Named Inventor | Enrico Calamai | |
| | Art Unit | | |
| | Examiner Name | | |
| Total Number of Pages in This Submission | 10 | Attorney Docket Number | 6097P070 |

| ENCLOSURES (check all that apply) | | |
|---|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input checked="" type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Return Postcard (1); Copy of Notification of Missing Requirements (2)</div> |
| Remarks | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|--|
| Firm or Individual name | Michael J. Mallie, Reg. No. 36,591 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP |
| Signature | |
| Date | 2/3/06 |

| CERTIFICATE OF MAILING/TRANSMISSION | | | |
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| Typed or printed name | Joyce Klein | | |
| Signature | | Date | 2-3-06 |



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re the Application of:

ENRICO CALAMAI

Application No.: 10/539,378

Filed: June 15, 2005

For: **METHOD AND SYSTEM FOR MONITORING A
RECIPROCATING COMPRESSOR**

Art Group: #4

Examiner:

Mail Stop Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO NOTICE TO FILE MISSING PARTS

Sir:

In response to the Notice to File Missing Parts mailed December 7, 2005, please find enclosed:

- a duly executed Declaration and Power of Attorney with payment in the amount of \$130.00 for the surcharge of 37 CFR § 1.16(e);
- and
- copy of the Notice to File Missing Parts of Application.

If any additional fee is required, please charge Deposit Account No. 02-2666. An extra copy of the Fee Transmittal is enclosed for deposit account charging purposes.

02/10/2006 ATRAM1 00000109 10539378
01 FC:1617 130.00 0p

Respectfully submitted,

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

Date: 2/3/06

12400 Wilshire Boulevard, 7th Floor
Los Angeles, CA 90025
Telephone: (408) 720-8300

Michael J. Mallie, Reg. No. 36,591

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Joyce Klein

2-3-06
Date